Fax émis par : 04 78 60 90 89 CABINET LAVOIX LYON 21/12/01 16.47 Pg.

DECLARATION AND POWER OF ATTORNEY	ATTORNEY'S DOCKET NO. 13864
PATENT APPLICATION	

As below named inventor, I hereby declare that:

My residence, post office address and citizenship is as stated below next to my name.

I verily believe I am the original, first and sole or joint inventor (if plural, inventors are named below) of the invention entitled:

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POWER OF ATTORNEY: As a named inventor, I hereby appoint the attorney(s) and/or_

agent(s) listed below to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. The undersigned hereby authorizes the U.S. attorney or agent named herein to accept and follow instructions from CABINET LAVOIX-LYON as to any action to be taken in the Patent and Trademark Office regarding this application without direct communication between the U.S. attorney or agent and the undersigned. In the event of a change in the person's from whom instructions may be taken, the U.S. attorney or agent named herein will be so notified by the

undersigned. RALPH A. DOWELL

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100 min	FULL NAME OF	FAMILY NAME GABERT	first given name Norbert	SECOND GIVEN NAME
202	RESIDENCE & CITIZENSHIP	CITY SAINT SORLIN EN VALLOIRE	STATE OR FOREIGN COUNTRY FRANCE	COUNTRY OF CITIZENSHIP
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203	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful statements may jeopardize the validity of the application or any patent issuind thereon.

SIGNATURE OF INVENTOR 20)	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
12-20-2001 DATE	12/20/2001	DATE